



**DEPARTMENT OF CORRECTIONS
POLICIES AND PROCEDURES**

Policy No.: DOC 4.5.11	Subject: INFECTION CONTROL PROGRAM
Chapter 4: FACILITY/PROGRAM SERVICES	Page 1 of 4
Section 5: Health Care	Revision Date:
Signature: /s/ by Director Rick Day 1/5/98	Effective Date: May 1, 1998

I. POLICY:

It is the policy of the Department of Corrections to maintain an Infection Control Program which will assist in maintaining a safe and healthy environment. The Health Services Unit in each facility/program will maintain this program.

II. AUTHORITY:

53-1-203, MCA. Powers and Duties of Department of Corrections

National Commission on Correctional Health Care:

- Standards for Health Services in Prison, 1997
- Standards for Health Services in Juvenile Detention and Confinement Facilities, 1995

DOC 1.3.35, Bloodborne Pathogens Exposure Control Plan and Hepatitis B Immunization

OSHA and Environmental Protection Agency standards

III. DEFINITIONS:

Infection Control Committee typically includes nursing, maintenance, laundry workers, and other staff as deemed appropriate by the facility.

IV. PROCEDURES:

A. General

The Continuous Quality Improvement (CQI) Program will monitor infectious and communicable diseases in an effort to minimize their occurrence. Offenders afflicted with infectious or communicable diseases will receive prompt care and treatment. Universal Precautions and the proper decontamination and/or disposal of medical supplies and biohazardous waste will be utilized.

B. Infectious Disease Screening

Offenders admitted to secure facilities and residential programs shall be screened on admission for tuberculosis and acute infectious diseases. Each juvenile facility/program will ensure that a current immunization history for measles, mumps, rubella and tetanus is obtained and recorded on the offender's medical history form.

1. Female offenders should be screened for gonorrhea and chlamydia.
2. Pregnant offenders should be screened for HbsAg. HIV counseling and testing is recommended.

C. Immunizations

Immunizations will be made available to individuals without adequate immunizations or whose medical conditions would be severely compromised if they were infected with vaccine preventable diseases. It is recommended that residential programs utilize local public health services for these immunizations and screening.

D. Flu Vaccine

An influenza vaccine program may be offered each fall to individuals identified at risk for complications of influenza.

E. HIV

HIV counseling, education and testing will be made available to all offenders upon request.

F. Tuberculosis

1. Offenders will be screened annually for tuberculosis as outlined by the Health Services TB Screening Protocol.
2. All Department employees who work in residential facilities/programs will be required to have TB skin testing (Mantoux) upon employment and annually thereafter.

G. Hepatitis B

1. Hepatitis B vaccinations must be offered to Department staff identified as at risk in accordance with DOC 1.3.35.
2. Offender workers identified as being at risk of exposure to blood or blood products in the course of their job responsibilities must be offered Hepatitis B vaccination.

H. Treating Offenders

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Offenders presenting with acute or chronic infectious or communicable diseases will be treated in accordance with the American Public Health Association guidelines, and must be provided information about transmission and methods to prevent future infection of self or others.

I. Isolating Offenders

When a physician orders an offender to be isolated for an infectious disease, the Center for Disease Control publication “Guidelines for the Prevention and Control of Nosocomial Infections” will be followed (i.e., offenders diagnosed with active tuberculosis are to be isolated in an isolation room with negative air pressure on-site or by referral).

Health Services employees will instruct correctional employees on measures to prevent disease transmission, including additional precautions which may be necessary during transport, hospital supervision or while in an infirmary.

J. Prevention

An integral component of the Infection Control Program is prevention of the occurrence and spread of infectious and communicable diseases.

1. Ongoing education regarding communicable disease prevention will be provided to staff and offenders as part of the health education program.
2. Ongoing communication is essential between the Department Health Services in each facility/program, the respective County Health Department, and the Montana Department of Public Health and Human Services.

K. Reporting

Each facility/program will be responsible for reporting infectious and communicable diseases to the Montana Department of Public Health and Human Services and the Department=s Health Services Manager.

L. Bodily Fluid Exposure

Bodily fluid exposure incidents are to be handled and treated in accordance with DOC 1.3.35. Employees providing care to offenders will be required to use Universal Blood and Body Fluid Precautions in accordance with DOC 1.3.35.

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M. Infection Control Committee

Each Department facility will have an Infection Control Committee which meets at least quarterly with the facility CQI Council.

1. Notes of these meetings will be kept and maintained on file.
2. Functions of this committee include but are not limited to:
 - a. tracking of infectious and communicable diseases through Health Services and/or safety and sanitation reports;
 - b. analysis of epidemiological data and trends;
 - c. recommendations to decrease the incidence of these diseases; and
 - d. surveillance of the facility=s application of universal precautions, cleaning and disinfectant techniques, and the disposal of medical and biohazardous waste;
3. Each Infection Control Committee will provide a quarterly report to the Department Health Services Manager. This report will contain the incidence of reportable infectious and communicable diseases and significant occurrences related to infection control.

N. Medical Sharps and Biohazardous Waste

Medical sharps and biohazardous waste are to be disposed of utilizing methods and materials that are in compliance with Environmental Protection Agency Standards. The facility/program is responsible for making arrangements for proper disposal based on what is available in their respective communities.

O. Decontamination

Contaminated non-disposable medical equipment will be decontaminated using appropriate methods as specified by the manufacturer and OSHA guidelines.

P. Pre-Release Centers and Juvenile Detention Facilities

Pre-release centers and juvenile detention facilities will develop local policy that will be commensurate with health resources available, while ensuring compliance with TB testing guidelines (upon admission and annually), bloodborne pathogens policy and universal precautions.

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V. CLOSING:

Questions concerning this policy shall be directed to the Department Health Services Manager.